USSN: 10/737,144 Atty Dkt: DURE-050 PATENT

Thereby certify that this correspondence, along with any paper referred to as being attached or enclosed, is being deposited with the United States Postal Service on ______ 22 December 2009 ____ in an envelope with sufficient postage as First Class Mail service pursuant to 37 C.F.R. §1.8, and addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450 Alexandria,

VA 22313-1450.

/

Printed: Crystal Susa_

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: YUM, et al.

Title: ORAL DRUG DELIVERY SYSTEM

Serial No.: 10/737,144

Filing Date: 15 December 2003

Examiner: Blessing M. Fubara

Group Art Unit: 1618

MS Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

INFORMATION DISCLOSURE STATEMENT WITH FEE UNDER §1.17(p)

Sir:

Pursuant to 37 C.F.R. §§ 1.56, 1.97 and 1.98, applicants wish to call to the attention of the Examiner the enclosed "Supplemental List of References Cited by Applicants." The right is reserved to antedate any item in accordance with standard procedure.

Citation of the documents is not to be construed as an admission that the documents are necessarily prior art with respect to the instant invention. This submission is understood to complement the results of the Office's own independent search. Citation of the documents shall not be construed as a representation that a search has been made or that the cited items are inclusive of all the relevant and material citations that may be available publicly. Some of the documents may have markings thereon. No significance is meant to be attached to the markings,

Applicants respectfully request that the cited document be considered by the Office and that the initialed copy of the Supplemental List of References Cited by Applicants be returned to applicants.

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It is believed that this disclosure complies with 37 CFR §§ 1.56, 1.97 and 1.98 and the Manual of Patent Examining Procedures § 609. If for some reason the Office considers otherwise, please telephone the undersigned.

Please charge Deposit Account No. <u>50-1953</u> the \$180.00 fee for the Information Disclosure Statement under 37 C.F.R. §1.17(p). The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. <u>50-1953</u>.

Date: 22 December 2009

If there are any questions regarding the above, the Office is invited to call the undersigned at (408)777-4915.

Respectfully submitted,

Thomas P. McCracken Registration No. 38,548

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